ı	PATENT APPLICATION FEE DETERMINATION RECORD									Application of Docket Number				
Effective December 8, 2004									1	10/571,982				
CLAIMS AS FILED - PART I								SMALL E	NTITY		_	R THAN		
			(Colum	nn 1) ·		(Column 2)	_	TYPE		°	R SMAL	L ENTITY		
U.S. NATIONAL STAGE FEES								RATE	FÉE		RATE	FE		
8	ASIC FEE		SMALL EN	SMALL ENT. = \$ 150		RGE ENT. = \$ 300		BASIC FEE	150) 0	R BASIC FEE			
=	MOLTANIMAX	FEE .	1	Satisfies PCT Article 33(1)- (4) := "\$ 50 / \$ 100		other situations =]	EXAM FEE	100	7	EXAM FEE			
SEARCH FEE			ALL other co	U.S. is ISA = \$ 50 / \$ 100 ALE other countries = \$ 200 / \$ 400		All other situations = \$ 250 / \$ 500		SEARCH FEE	201	2	SEARCH FEE			
FEE FOR EXTRA SPEC. PGS.			min	minus 100 =		/ 50 =		X \$ 125 =			X \$ 250 =	:		
C	OTAL CHARGE	ABLE CLAIMS	/8 minus 20 =		•]	X \$ 25 =		ÖF	X \$ 50 =			
V	DEPENDENT C	CLAIMS	/ minus 3 = .		•			X \$ 100 =		OF	X \$ 200 =			
AL	ULTIPLE DEPENDENT CLAIM PRESENT							+ \$ 180 =		OF	+ \$ 360 =			
	It the difference	ce in column 1 is	less than zero	o, enter "0	in c	olumo 2	-	TOTAL	450	OF	TOTAL			
AMENDMENT A	21-10	(Column 1) CLAIMS REMAINING AFTER		(Column 2) HIGHEST NUMBER PREVIOUSLY				SMALL RATE	ADDI- TIONAL	OR	SMALL RATE	ADDI- TIONAL		
	3 5 0 Total	AMENDMENT 1	Minus	PAIDF		EXTRA		X \$ 25 =	FEE //	OR	V 5 50 -	FEE		
		1 18	Minus	W C			-		4-	OR	X \$ 50 =	<u> </u>		
	Independent	SENTATION OF A	ULTIPLE DEPENDENT CLA				-	X \$ 100 =	/	1	X \$ 200 =			
_	FIRST FRE		NOCTIFIE DEFE	THOEIT OF			Ļ	+ \$ 180 =	/	OR OR	+ \$ 360 =			
						-		FEE (<i>y</i>	J OK	FEE			
		(Column 1)		(Column		(Column 3)	_							
,		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	••		= .		X \$ 25 =		OR:	X \$ 50 =			
	independent	•	Minus '	***		=		X \$ 100 =		OR	X \$ 200 =			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =			
_	•						To	FEE		OR	TOTAL ADDIT. FEE			
				•						•				
								•			•			
		mn 1 is less than the mber Previously Paid									•			
		mber Previously Paid	i For IN THIS SPAI For (Total or Indep				the e	oorooriate box i	n column 1					